



March 21, 2014

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW,
Room TW-A325
Washington, DC 20554

RE: Comments on Proposed Rule Technology Transitions; Connect America Fund; Numbering Policies for Modern Communications

Dear Secretary Dortch:

As longstanding supporters of improving patient access to electronic health supports we are providing comments on "Section VI. Further Notice of Proposed Rulemaking (WC Docket No. 10-90) at para 227" to express our concern regarding what appears to be a wavering of commitment to robust rural health care connectivity.

Skilled Nursing Facilities (SNFs) play an important role in the delivery of care in communities across the country. SNFs provide care to over 3 million relatively high acuity patients each year, and a significant and growing site of service for telehealth. We believe the inclusion of SNFs is necessary in any broad based, care coordination of care effort. The aim of the FCC rural healthcare connect initiative is to:

- increase access to broadband for health care providers (HCPs), particularly those serving rural areas;
- foster the development and deployment of broadband health care networks; and
- maximize the cost-effectiveness of the program.

Simply put, a care network that leaves out such a significant provider group is going to be hampered if the goal is improved quality, care coordination, or improved care delivery for patients. Use of telehealth and electronic health supports is growing and evolving, and generally speaking the FCC aim to improve health care connectivity should as well.

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Paragraph 227

We seek comment on the amount of funding we should allocate for such experiments. If we move forward with rural healthcare broadband experiments, we propose to do so in a manner that would not impact the size of the Fund. Specifically, we propose funding any such experiments out of the \$50 million currently authorized for the skilled nursing facility pilot program. The Commission has previously decided to set aside that amount of one-time support for testing broadband use in telemedicine. We seek comment on this proposal and other options that would not impact the size of the Fund, such as funding coming from the existing Connect America Fund budget or the rural health care mechanism.

Public Notice DA 14-223

It sought comment on using either funds from the connect America Fund or from the rural healthcare mechanism for the rural healthcare broadband experiments, including whether to use some part of the \$50 million set aside by the Commission in the Healthcare Connect Fund Order for the SNF Pilot Program. In light of the Commission's inquiry about using some portion of SNF Pilot Program funding for these experiments, it instructed the Bureau to defer implementation of the SNF Pilot Program until the Commission determines whether to use SNF Pilot Program funds for the rural healthcare broadband experiments.

We agree with FCC 12-150, that the best way to make informed decisions in this area is to test it. We are however concerned with the apparent delay in the pilot and what appears to be a signal that the monies for the three year pilot could slowly become piggy bank for other experiments. While we would do not intend to judge the merits of other potential pilot programs, in fact we may likely support any number of initiatives related to technological advances aiding vulnerable populations like veterans or the elderly aging in place, it doesn't mean there should be a delay in what you appear ready to test now – the feasibility of improving care connectivity for SNFs.

Use of telehealth and electronic health supports for improving care access and timing are rapidly growing. Patients and residents will be the loser if the feasibility of adding SNF facilities to the rural health care connectivity network isn't at least explored. This pilot has the potential to provide definitive insights to the FCC, Congress, and the public regarding how best to move forward in addressing the rural health care connectivity needs of the future and we respectfully suggest that the Commission will be remiss if there is foot dragging on this experiment.

Heath Everywhere

Health Everywhere is a coalition dedicated to the advancement of patient access to electronic health supports, who's members directly serve nearly 1.2 million of mostly seniors and also other individuals (in addition to providing comfort to millions of their loved ones). Advocates such as Philips, The Evangelical Lutheran Good Samaritan Society and many others are implementing technologies, systems and research to help seniors age well and in place.



Thank you for your consideration of our comments. Should you have any questions, please contact me at (202) 558-5272 or jscott@appliedpolicy.com.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jim Scott', written over a light blue horizontal line.

Jim Scott
Executive Director
Health Everywhere

Two thin, light blue curved lines that sweep upwards and to the right, framing the contact information.

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